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Bib Data Sheet

CONFIRMATION NO. 3525

SERIAL NUMBER 10/053,438	FILING DATE 01/17/2002 RULE	CLASS 705	GROUP ART UNIT 2161	ATTORNEY DOCKET NO. 01.727	
APPLICANTS Kevin O'Brien, Cincinnati, OH; Mark Daly, Cincinnati, OH;					
** CONTINUING DATA * <input checked="" type="checkbox"/>					
** FOREIGN APPLICATIONS * <input checked="" type="checkbox"/>					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY ** ** 02/14/2002					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Not after met Verified and <input checked="" type="checkbox"/> Allowance Acknowledged <input checked="" type="checkbox"/> Examiner's Signature <input type="checkbox"/> Initials		STATE OR COUNTRY OH	SHEETS DRAWING 2	TOTAL CLAIMS 35	INDEPENDENT CLAIMS 3
ADDRESS Barry L. Kelmachter BACHMAN & LaPOINTE, P.C. Suite 1201 900 Chapel Street New Haven, CT 06510-2802					
TITLE Interactive system for providing healthcare information					
FILING FEE RECEIVED 505	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:				
<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit					